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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 08/920,156 08/26/1997 PAT 6,016,038
 and claims benefit of 60/071,281 12/17/1997
 and claims benefit of 60/068,792 12/24/1997
 and claims benefit of 60/078,861 03/20/1998
 and claims benefit of 60/079,285 03/25/1998
 and claims benefit of 60/090,920 06/26/1998

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 01/14/1999**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 78	TOTAL CLAIMS 57	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

KINETIC ILLUMINATION SYSTEM AND METHODS

FILING FEE RECEIVED 1714	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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